



12 November 2020

Dear Sir/Madam

## **RESPONSE TO COUNSEL ASSISTING FINAL SUBMISSION**

Thank you for the opportunity to provide a response to Counsel-Assisting's final submission and other matters, including remarks made by the Commissioners, at the final hearing. On behalf of ACSA members, I would also like to acknowledge and thank the Commission for the work that has been done since the Royal Commission began in drawing out the many issues inherent in the aged care system.

Many of these issues were highlighted in the final submission and covered by the recommendations. ACSA has submitted a response on the recommendations via the requested spreadsheet format. Largely ACSA supports, or supports in principle, the recommendations made. We have made some suggestions we hope will be considered and incorporated in developing the final Royal Commission Report.

This covering letter draws out some themes and matters that were difficult to capture fully in the line by line format.

### **What Is Aged Care?**

The final submission makes recommendation to merge the home care package and home care support programs which we fully support. It also goes some way to identifying the streams within the program and the services people can expect to receive.

In discussing residential care, Counsel Assisting has largely stuck with the existing program construct and focussed on the model of delivery and built form, favouring the small household model. ACSA supports that model but suggests that there are also a number of program streams within residential care that warrant being considered separately:

- Complex health care;
- Palliative care;
- Dementia care;
- Respite care; and
- Restorative or Rehabilitative care.



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The small household model and funding approach recommended will work for a number of these but there are different ways of delivering respite care (a hotel like environment), palliative care (in a hospice like setting) and restorative or rehabilitative care (settings that are more akin to public health sub-acute care). In finalising the report, it would be helpful to see these important elements drawn out and acknowledgement that the model of care, the required built form (often within a larger facility) and the funding to support each stream should be fit for purpose and may well be different.

In addition, confirming the offering to be covered by Government funding within an integrated home care program and in residential services will be important. The current program guidelines in Home Care and Support and the Specified Care & Services Schedule for residential care leaves much open to ongoing debate.

### **High Quality & Safe Care**

This term is central to many of the recommendations in the final submission. Greater definition is needed of what this really means, particularly as a result of the proposed general duty of care, and the intent that civil penalties could result if a service does not meet this benchmark. It will need to be able to be objectively defined and measured.

### **Commonwealth Home Support Program (CHSP)**

This program supports the largest number of older Australians and their carers at any one point in time. It is critical to individuals and to the system to ensure people can remain as independent as possible in their own home and community.

Integrating the CHSP with the Home Care Package Program is a major recommendation which ACSA fully supports. However, this will take time to achieve and greater support, including funding keeping pace with demands and costs, is needed to ensure the critical services offered don't fall further behind.

### **Organisational Governance**

Good organisational governance is critical to achieving quality of care and outcomes for older Australians. The final submission makes this point well and a number of recommendations, which ACSA supports, will strengthen the level and quality of governance in aged care. Broadly, aged care governance should be consistent with general governance legislation and requirements as far as is practicable. While understanding the rationale behind the recommendation to introduce civil penalties, ACSA is concerned that there is no other human service where this penalty is applied.



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## **System Governance**

Significant change is recommended to system governance including the creation of a number of new statutory authorities. In her comments, Commissioner Briggs outlined an alternative view to that put by Counsel-Assisting utilising the existing infrastructure.

The key driving principles for the recommendations made are independence and transparency which are critical for good governance. ACSA is concerned that the proposed governance arrangements are not as clear on who is ultimately accountable and responsible for aged care.

Whichever model is ultimately recommended and adopted transparency and independence need to be a key part of the arrangements but there also needs to be clarity around ultimate accountability and responsibility, built into the final design to ensure that good governance is able to be achieved in the sector and to overcome the issues within the current arrangements.

## **System Financing**

The final submission did not make recommendations on the overall financing model for the aged care system. ACSA understands that this was largely due to the limited time between the specific hearing on this and the timing of the final hearing. This makes it difficult to fully support or comment on the recommendations on how individuals pay for the care they receive.

This is a key matter that needs to be dealt with in the final report to ensure that the reform we all want to see and is so desperately needed can be achieved.

Yours sincerely,

**Patricia Sparrow**  
Chief Executive Officer  
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